

BOARD:  
Elizabeth M. Hagood  
Chairman  
Mark B. Kent  
Vice Chairman  
Howard L. Brilliant, MD  
Secretary



C. Earl Hunter, Commissioner

*Promoting and protecting the health of the public and the environment.*

BOARD:  
Carl L. Brazell  
Louisiana W. Wright  
L. Michael Blackmon  
Coleman F. Buckhouse, MD

Please complete and return this form with your signed Memorandum of Agreement:

“I have received a copy of the *South Carolina Department of Health and Environmental Control, School Dental Program Manual*, dated February 20, 2004, Revised August 2006. I have read and understand the manual contents. I understand pursuant to my participation as a provider in the School Dental Program that I am bound by the program requirements as set forth in the Manual, and incorporated by reference in the Memorandum of Agreement. I agree to follow the guidelines as set forth in the Manual and the Memorandum of Agreement. I also understand that any modifications to the program will be incorporated into the Manual and that I will be provided a copy at the time the modification is effective.”

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Organization or Company Name

(Please retain a copy of this document for your records and return the original in the self-addressed envelope.)